## PR001 17-Dec-13

## **Preliminary Report of Accident**

## U.S. Department of Labor

Mine Safety and Health Administration

1

1. Accident Type:	2. Accident Cla		3. Date/Time of Accident 4. Date/Time of De					ath 5. Fatal Case No			
Fatal Injury	Other Accid	12/10/2013	45 AM				22				
6. Mine Information :											
a) Mining Company Name		b) Mine Name				c)	Parent of	f Mining C	отрану		
Hunter Sand & Gravel, Ll	_C.	Dredge IV	HMT Hold				lings, Inc.				
7. Mine Location :	a) City	b) C	ounty	c) State		1	8. Mine ID Number:			9. Union:	
Led	lbetter	Livingsto	n	KY			15-17687			NO	
10. Primary Mineral Mined:		11. Number of	a) Total b)	Underground	c) (	)pen Pit/	Quarry	d) M	ill/Prep Plant	e) (	Other
COMMON SAND MININ	G	Mine Employees:	10	0			0		0		10
12. Contractor Name:						13. Uni	on		14. Contra	ctor ID Nun	nber:
15. Contractor Address:	a) City		b)	County		· -	c) Sta	ate	d) Z	ip Code	
16. Number of Contractor En	aployees:	a) Total b)	Underground	с) Орег	n Pit/Qu	лагу		d) Mill/Pro	p Plant	e) Other	
17. Number of Persons in Mir	ne at Time of Acc	ident:		18. Number of Persons Unaccounted For:							
a) Mine Employees:	5	b) Contractor Employee	es:	a) Mine Er	nployee	s:	1	b) Co	ntractor Em		
19) Location of Accident		02 O= P4	07.4.	Minin F	20.5	t:HD	Dland		( '0')	20. Min	ning Height:
01-Underground		03-Open Pit	Mining	_	_	ep Plant Other (specif			Feet	Inches	
02-Surface at Undergrou		06-Dredge Mining	08-Retreat I	Mining	99-0	Office Fac	cility				
21. Nonfatal Injuries:	22. F	'atal Injuries:		_				_			
23. Victim Information :	Dust	a) Name in Burnham		b) Age 27							
c) Regular Job Title: Deckhand		d) Activit	y at Time of Accid						X N	Aine Empl	oyee
24. Experience : Years W	eeks Days	Years We	eks Days		Yea	ars Week	s Days			Years Wee	ks Days
a) Total: 4 3	7 0 E	o) at the mine: 0	6 4 c) at	activity (23d)		4 37	0	d) with	Contractor	0 0	0
25. Autopsy Performed:			26. Mine Telephone No.: (270) 898-8613								
<del></del>							<u> </u>	(270	090-0013		
The miner was working or into the water.	n a dredge that	t had a barge tied to its	s right front side	e. The victim s	-tepped	d on the	e barge t	o observ	ethe level ir	dicators w	then he fell
The information provided in regarding the cause of the acceptance	ident.	ed on preliminary data Of	NLY and does not	represent final		inations r	egarding	the nature	of the incide	nt or conclus	sions
30. District: 32. Field Off			ice: Franklin TN			_	33. Event Number: 6643374				
34. Accident Investigator:		<u>_</u>	35. MSHA Pers	son Notified:				D:	ıte	Time	e
Scott Johnson			Michae	I A. Evans				12/10/	2013	04:42 A	
36. Type of Report	mended	37. Name of Preparer	and Date Prepare Mike Harcher					_	Date		
38. Reason For Amendment:		1							10/20		
Item 24 a, b, c											